

CCld: Oliver Orjiako  
Jenna Kay  
Sonja Wisser

Rebecca Messinger

**From:** Kathleen Otto  
**Sent:** Wednesday, June 2, 2021 12:51 PM  
**To:** Tina Redline; Rebecca Messinger  
**Subject:** FW: Shoreline Management Program and WAC 173



**Kathleen Otto**  
County Manager

564-397-2458



**From:** Clark County Citizens United, Inc. <cccuinc@yahoo.com>  
**Sent:** Wednesday, June 2, 2021 12:02 AM  
**To:** Eileen Quiring O'Brien <Eileen.QuiringOBrien@clark.wa.gov>; Gary Medvigy <Gary.Medvigy@clark.wa.gov>; Karen Bowerman <Karen.Bowerman@clark.wa.gov>; Julie Olson <Julie.Olson2@clark.wa.gov>; Temple Lentz <Temple.Lentz@clark.wa.gov>; Kathleen Otto <Kathleen.Otto@clark.wa.gov>  
**Subject:** Shoreline Management Program and WAC 173

**CAUTION:** This email originated from outside of Clark County. Do not click links or open attachments unless you recognize the sender and know the content is safe.

## FOR THE PUBLIC RECORD

Dear Councilors,

The following attached information must be considered within the Shoreline Management Program text. Discussions of whether the county regulation was more restrictive than the state regulations is appropriate conversation from the Council. It appears that the 60% rebuild requirement was indeed changed to 75% at some point. But, that passage also obligates the homeowner to other development codes that contain the 60% requirement as well as other more restrictive regulations. At a 11-13-15 hearing, staff seemed unable to know or find the answer as to whether county code was more restrictive than the state, and begged to have more time to research the information. But, it was a simple process to find the information in the WACs, and the county staff should have already had that information at their fingertips.

Clark County Citizens United, Inc. has attached that state document for the councilors review. In item WAC 173-27-080, Nonconforming use and development standards, it clearly spells out what the state will allow. You will see in item (g), that the 75% is recommended. The SMP was changed to 75%, but the question is, were the other codes relating to the 60%, also changed to 75%? The SMP defers

to the other development codes and Christine Cook alluded to the fact that other codes also had the 60%. CCCU believes the Councilors need to assure consistency throughout the codes and the state, by confirming the 75% is used in all regulations pertaining to the SMP.

Sincerely,

Carol Levanen, Exec. Secretary

Clark County Citizens United, Inc.  
P.O. Box 2188  
Battle Ground, Washington 98604

**WACs > Title 173 > Chapter 173-27 > Section 173-27-080**

**HTML has links - PDF has Authentication**

**Print This Page**

**173-27-070** << 173-27-080 >> **173-27-085**

**Agency filings affecting this section**

**PDF WAC 173-27-080**

**Nonconforming use and development standards.**

Local governments typically develop their own approaches to addressing nonconforming use and development. This section is intended to apply if a shoreline master program does not contain locally adopted nonconforming use and development standards. When nonconforming use and development standards do not exist in the applicable master program, the following definitions and standards shall apply.

**(1) Definitions.**

(a) "Nonconforming use" means an existing shoreline use that was lawfully established prior to the effective date of the act or the applicable master program, but which does not conform to present use regulations due to subsequent changes to the master program.

(b) "Nonconforming development" or "nonconforming structure" means an existing structure that was lawfully constructed at the time it was built but is no longer fully consistent with present regulations such as setbacks, buffers or yards; area; bulk; height or density standards due to subsequent changes to the master program.

(c) "Nonconforming lot" means a lot that met dimensional requirements of the applicable master program at the time of its establishment but now contains less than the required width, depth or area due to subsequent changes to the master program.

**(2) Nonconforming structures.**

(a) Structures that were legally established and are used for a conforming use but are nonconforming with regard to setbacks, buffers or yards; area; bulk; height or density may continue as legal nonconforming structures and may be maintained and repaired.

(b) Nonconforming structures may be enlarged or expanded provided that said enlargement meets the applicable provisions of the master program. In the absence of other more specific regulations, proposed expansion shall not increase the extent of nonconformity

by further encroaching upon or extending into areas where construction would not be allowed for new structures, unless a shoreline variance permit is obtained.

(c) Nonconforming single-family residences that are located landward of the ordinary high water mark may be enlarged or expanded in conformance with applicable bulk and dimensional standards by the addition of space to the main structure or by the addition of normal appurtenances as defined in WAC 173-27-040 (2)(g) upon approval of a conditional use permit.

(d) A structure for which a variance has been issued shall be considered a legal nonconforming structure and the requirements of this section shall apply as they apply to preexisting nonconformities.

(e) In the absence of other more specific regulations, a structure which is being or has been used for a nonconforming use may be used for a different nonconforming use only upon the approval of a conditional use permit. A conditional use permit may be approved only upon a finding that:

(i) No reasonable alternative conforming use is practical; and

(ii) The proposed use will be at least as consistent with the policies and provisions of the act and the master program and as compatible with the uses in the area as the preexisting use.

In addition such conditions may be attached to the permit as are deemed necessary to assure compliance with the above findings, the requirements of the master program and the Shoreline Management Act and to assure that the use will not become a nuisance or a hazard.

(f) A nonconforming structure which is moved any distance must be brought as closely as practicable into conformance with the applicable master program and the act.

(g) If a nonconforming development is damaged to an extent not exceeding seventy-five percent of the replacement cost of the original development, it may be reconstructed to those configurations existing immediately prior to the time the development was damaged, provided that application is made for the permits necessary to restore the development within two years of the date the damage occurred.

(3) Nonconforming uses.

(a) Uses that were legally established and are nonconforming with regard to the use regulations of the master program may continue as legal nonconforming uses.

(b) In the absence of other more specific regulations in the master program, such uses shall not be enlarged or expanded, except upon approval of a conditional use permit.

(c) If a nonconforming use is discontinued for twelve consecutive months or for twelve months during any two-year period, the nonconforming rights shall expire and any subsequent use shall be conforming unless reestablishment of the use is authorized through a conditional use permit which must be applied for within the two-year period. Water-dependent uses should not be considered discontinued when they are inactive due to dormancy, or where the use includes phased or rotational operations as part of typical operations. A use authorized pursuant to subsection (2)(e) of this section shall be considered a conforming use for purposes of this section.

(4) Nonconforming lot. A nonconforming lot may be developed if permitted by other land use regulations of the local government and so long as such development conforms to all other requirements of the applicable master program and the act.

[Statutory Authority: Chapter 90.58 RCW. WSR 17-17-016 (Order 15-06), § 173-27-080, filed 8/7/17, effective 9/7/17. Statutory Authority: RCW 90.58.140(3) and [90.58].200. WSR 96-20-075 (Order 95-17), § 173-27-080, filed 9/30/96, effective 10/31/96.]

Rebecca Messinger

*cc'd: Oliver Orjiako; Jose Alvarez; sonja Wiser*

**From:** Kathleen Otto  
**Sent:** Thursday, June 10, 2021 12:28 PM  
**To:** Tina Redline; Rebecca Messinger  
**Subject:** FW: 6-9-21 VBLM Report and Work session fatally flawed



**Kathleen Otto**  
County Manager

564-397-2458



**From:** Clark County Citizens United, Inc. <cccuinc@yahoo.com>  
**Sent:** Thursday, June 10, 2021 12:26 PM  
**To:** Eileen Quiring O'Brien <Eileen.QuiringOBrien@clark.wa.gov>; Gary Medvigy <Gary.Medvigy@clark.wa.gov>; Karen Bowerman <Karen.Bowerman@clark.wa.gov>; Julie Olson <Julie.Olson2@clark.wa.gov>; Temple Lentz <Temple.Lentz@clark.wa.gov>; Kathleen Otto <Kathleen.Otto@clark.wa.gov>  
**Subject:** 6-9-21 VBLM Report and Work session fatally flawed

**CAUTION:** This email originated from outside of Clark County. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Clark County  
Council  
June 10, 2021  
P.O. Box 5000  
Vancouver, Washington 98666  
via email

FOR THE PUBLIC RECORD

Dear Councilors,

It is with grave concern that Clark County Citizens United, Inc. did not have an opportunity to give input to the information given the Council for a June 9, 2021 Vacant Buildable Lands / VBLM Work Session. In addition, that meeting was fatally flawed because it was not properly noticed. Staff can say they simply forgot to put a title on the meeting information, but as far as the public is concerned, all of those items noted on the website, were under the Board of Health Meeting, which was canceled.

A member of the VBLM Committee and Clark County Citizens United, Inc. called staff to inquire how he would be able to give input, after he accidentally found a work session had been lumped with the Board of Health meeting. Staff contacted him later to say no comments were allowed, because it was a work session. After he contacted the CCCU Board about this un-noticed meeting, a few members were able to listen in. During the conversation, three of the other VBLM Committee members did speak, and one spoke at length. This was a flawed process and clearly a discriminatory action by the county.

The whole Vacant Buildable Lands Model process is fatally flawed because it does not encompass all of Clark County, but rather is confined to the city of Vancouver. The Growth Management Act, under 36.70A.215 and in other related RCWs and WACs clearly state that counties are to provide to the state, a Vacant Buildable Lands Model Report that encompasses the whole county and not only a select city.

Clark County has not prepared, nor will be providing the correct information to the state, and would be in violation of the law. This is a legal matter that is subject to court actions. Clark County Citizens United, Inc. urges the Clark County Board of Council to correct this problem and provide housing data and remedies throughout Clark County that reflect what is required in the GMA and mandated Vacant Buildable Lands Model Report.

Sincerely,

Carol Levanen, Exec. Secretary

Clark County Citizens United, Inc.  
P.O. Box 2188  
Battle Ground, Washington 98604

6/9/2021 Agenda **Board of Health meetings are closed to the public until further notice, but tl encourage participation in the following ways:**

- Watch Board of Health live on CVTV (Comcast channel 23)
- Livestream from your personal computer, [www.cvtv.org](http://www.cvtv.org)
- Listen to audio only by calling : 1-408-418-9388 and meeting access code:
- Submit comments: [https:// www.clark.wa.gov/councilors/public-comment](https://www.clark.wa.gov/councilors/public-comment)

**Participate in Open Public Comment during the meeting:**

- Register by sending an email to [rebecca.messinger@clark.wa.gov](mailto:rebecca.messinger@clark.wa.gov) and indicate v you wish to speak at and the topic you wish to address
- Please read the following instructions to participate in the Open Public Commer the meeting.

- **Join by computer:**  
<https://clarkwa.webex.com/clarkwa/j.php?MTID=e89a2791b4ec103143db0>
- **Join by phone:** Dial: 1-408-418-9388  
Access Code: 1878 18 9735

Board of Health

**Work Session via WebEx (audio only)**

**Phone: 1-408-418-9388**

**Access Code: 1878 18 9735**

**Work Session:** Vacant Buildable Land Model

- Staff Presentation
- Industry Market Factor Model

**Council Council Time via WebEx (audio only)**

Time *Please note that the Council Time will begin at the conclusion of the work session.*

Agenda *able to access both with the same access code: 1878 18 9735*

**Council Time Items:**

- Minutes for June 2, 2021
- Work Session Requests: Essential Public Facilities
- Executive Sessions: 2 Collective Bargaining (15 minutes total); 1 Pending Litigation 42.30.110(1)(i) (10 minutes); 1 Real Estate RCW 42.30.110(1)(b) (10 minutes); 1 Real Estate 42.30.110(1)(c) (10 minutes)

Agenda Wednesday, June 9, 2021 PLEASE NOTE Meetings are closed to the public until further notice, but the Board encourages participation in the following ways:

- o Watch it live on CVTV (Comcast channel 23)
  - o Livestream from your personal computer, <http://www.cvtv.org>
  - o Listen to audio only by calling: 1-408-418-9388 and entering access code: 187 818 9735
  - o Submit comments: <https://www.clark.wa.gov/councilors/public-comment>
  - o or via the US Postal Service to the Clark County Council, c/o Rebecca Messinger, PO Box 5000, Vancouver, WA 98666-5000
  - o Read your comments into the record. Instructions are now available on the County website at <https://clark.wa.gov/councilors/clark-county-councilmeetings>. They can be found at the top of the meeting page, as well as in the related document portion of that meeting entry.
- 9:00 AM PLEDGE OF ALLEGIANCE CONSENT AGENDA
- o Minutes approved for May 26, 2021 COMMENTS FROM THE PUBLIC Any comments received will be provided to the Board of Health and filed in the record. DIRECTOR'S REPORT
  - o COVID-19 update COMMENTS FROM THE BOARD ADJOURN

Rebecca Messinger

CC'd: Dr. Melnick ; Doreen G.

**From:** MARGARET TWEET <tweetfamily@comcast.net>  
**Sent:** Tuesday, June 15, 2021 6:51 PM  
**To:** Gary Medvigy; Karen Bowerman; Julie Olson; Eileen Quiring O'Brien  
**Cc:** Senator Rivers; Rep. Vick; larry.hoff@leg.wa.gov; Rep. Ed Orcutt; Lynda Wilson; Rep. Kraft; Rebecca Messinger  
**Subject:** To Clark County Council public comments for June 15, 2021  
**Attachments:** chd-notice-for-eua-vaccines-6.4.21.pdf

**CAUTION:** This email originated from outside of Clark County. Do not click links or open attachments unless you recognize the sender and know the content is safe.

To the Clark County Council

From: Margaret Tweet, Clark County Resident

Please read and consider the following information. I note that Clark County Public Health continues to help distribute EUA vaccines to minors, no ID required at public schools and the Tower Mall.

CCPH offers these products as safe, and very safe without informing about the EUA status of the vaccines. or the fact that serious side effect could occur, per the EUA fact sheets for each COVID vaccine offered. Long term health impacts, or impacts on fertility and other parts of the body are unknown. Reports of serious injuries and deaths submitted to the CDC Vaccine Adverse Events Reporting System are not given due consideration during Board of Health meetings, nor are the risks of the investigational products timely shared with the public invited to the EUA investigational vaccine clinics. So far, I have seen no CCPH information to the public via the CCPH FB page that advertises clinics about the growing number of cases of heart problems after Pfizer vaccination.

Members of the public including minors in public schools should not be told by CCPH that a second dose of Pfizer is required or mandatory. Neither the first dose nor the second dose of any of the available COVID vaccines is mandatory per federal EUA law. Adverse events after the second dose may be worse or more frequent, see article and cases of heart problems after Pfizer second dose especially. Cases of severe disability after a single Pfizer dose have also been reported. CCPH has a duty to inform the public about the risks of the EUA products they are promoting and offering to the public. Sincerely, Margaret Tweet

Pfizer COVID Vaccine Trial Shows Alarming Evidence of Pathogenic Priming in Older Adults • Children's Health Defense ([childrenshealthdefense.org](https://childrenshealthdefense.org))

**"WHAT IF I DECIDE NOT TO GET THE PFIZER-BIONTECH COVID-19 VACCINE? It is your choice to receive or not receive the Pfizer-BioNTech COVID-19 Vaccine."** Pfizer-BioNTech COVID-19 Vaccine EUA Fact Sheet for Recipients and Caregivers ([fda.gov](https://www.fda.gov))

**"WHAT IF I DECIDE NOT TO GET THE JANSSEN COVID-19 VACCINE? It is your choice to receive or not receive the Janssen COVID-19 Vaccine."** Janssen COVID-19 Vaccine EUA Fact Sheet for Recipients and Caregivers 04232021 ([fda.gov](https://www.fda.gov))

"Under federal law, employers and universities cannot legally mandate COVID vaccines because they are unlicensed Emergency Use Authorization products which are, by definition, experimental." Please see notice below and the same notice is attached.

Microsoft Word - chd-notice-for-eua-vaccines.doc ([childrenshealthdefense.org](https://childrenshealthdefense.org))



**"VAERS data released shows 329,021 reports of adverse events following COVID vaccines, including 5,888 deaths and 28,441 serious injuries between Dec. 14, 2020 and June 4, 2021... Of the 5,888 deaths reported as of June 4, 23% occurred within 48 hours of vaccination, and 39% occurred in people who became ill within 48 hours of being vaccinated. This week's data for 12- to 17-year-olds show:**

- 5,367 total adverse events, including 165 rated as serious and four reported deaths among 12 to 17-year-olds. The youngest deaths reported include two 15-year-olds (VAERS I.D. 1187918 and 1242573), a 16-year-old (VAERS I.D. 1225942) and one 17-year-old (VAERS I.D. 1199455).
- 773 reports of anaphylaxis among 12- to 17-year-olds with 98% of cases attributed to Pfizer's vaccine, 1.8% to Moderna and 0.5% (or four cases) to J&J.
- 59 reports of myocarditis and pericarditis (heart inflammation) with 58 attributed to Pfizer's COVID vaccine.
- 16 reports of blood clotting disorders, all attributed to Pfizer.
- See full article below.

As Drug Makers Set Sights on Vaccinating 5-Year-Olds, Latest VAERS Data Show Number of Injuries, Deaths Continues to Climb • Children's Health Defense ([childrenshealthdefense.org](https://childrenshealthdefense.org))

Please see this Open Letter that explains EUA status

**To the President of the University of Washington, Members of the Board of Regents of the University of Washington,**

I write today as an alumnus of the University of Washington, a doctoral-level graduate from the program in Neurobiology & Behavior, from the Department of Environmental Health & Toxicology in the School of Public Health.

The reason for my writing this letter is my concern over the recent decision by President Anne-Marie Cauce to require students to get one of the three experimental COVID19 therapies in order to enter campus. In her recent email to the UW community (Protecting our community's health by requiring students to be vaccinated, May 3, 2021) she outlines her plans for requiring students to take FDA non-cleared COVID19 therapies as a prerequisite for attendance.

I need to bring to the attention of the President and the Board of Regents several critical and potential material omissions to the statements in the email.

1. Your email stated: **"Widespread vaccination is the only real way we can put the COVID-19 pandemic behind us and return to a more normal way of living, learning and working."**

As a matter of public health policy and scientific rigor, vaccination is only one tool that can be used to stop the spread of a community infection, but the unrealistic goal of stopping an airborne virus runs counter to all published public health and scientific publications. Natural occurring immunity, the use of effective and proven interventions (HCQ, Ivermectin and Chlorine Dioxide interventions) and proven public health measures (stay home if you are sick, wash hand, cover coughs, etc...) are effective and proven ways to protect the community. We now have an new endemic coronavirus in our virome and we need to treat it as such, not generate a long-march into the highly expensive and guaranteed-to-fail approach we are currently navigating.

2. Your email stated: **"Fortunately, vaccines are now readily available that have proven safe and highly effective, including through clinical trials in which our own faculty collaborated and during real-world experience."**

The statement of the COVID19 therapies being safe and highly effective is not a scientifically or legally defensible position, from a due diligence stand-point. The current roll-out of the Pfizer/Bio-N-Tech, Moderna and J&J therapies are only occurring due to an Emergency Use Authorization (EUA) implementation. The reality for all three COVID19 therapies is that they are part of a continuing Phase 2/3 clinical trial. Efficacy of preventing transmission has not been the goal of these trials, as stated in the Lancet and BMJ publications, but to determine the effectiveness in reducing symptoms and generate a preliminary safety profile. The ability to stop the spread or transmission of SARs-Cov-2 has not been proven or demonstrated. That is why the trials are scheduled to finish in 2023. Effectiveness had not been proven, only proxy measures of immunity (antibody-titers) have been produced.

Critical to correcting the statement by Dr. Cauce, the safety profile as reported by Pfizer/Bio-N-Tech, Moderna and J&J are preliminary and in question. Reports from public media, social media and other non-governmental sources are compiling a record that runs counter to the information that is being provided by the CDC, the Department of Health for WA state and the statements produced by the manufacturers of the COVID19 therapies. Recent reports at the Vaccine Adverse Events Reporting System (VAERS) (a CDC managed, passive reporting system) has shown that there is a 20X increase in death reports in the period directly after the EUA program for COVID19 shots. These are not small or insignificant numbers, as review of VAERS reporting has demonstrated that the deaths and adverse events (AEs) are 1%-10% of the estimated, true numbers. The true deaths and AEs are absolutely under-reported. The number of deaths, AEs and hospitalizations could be in the tens to hundreds of thousands due to the COVID19 therapies. When we look through the historical data for VAERS, vaccines that have been around for decades do show a steady state of deaths, adverse events and hospitalizations. In the first 6 months of the COVID19 EUA program, the deaths, AEs and hospitalizations are higher than all incidences of other vaccines on the market for the past 10-20 years....

For all charts and the full letter, see

Open Letter from a PhD to UW President & Regents - Informed Choice Washington

**" According to the CDC, a total of 475 cases of myocarditis or pericarditis were recorded in patients 30 and younger, but only 226 reports meet the agency's "working case definition."**  
CDC to Convene Emergency Meeting on 226 Reports of Heart Inflammation After COVID Vaccine in People Under 30 • Children's Health Defense ([childrenshealthdefense.org](https://childrenshealthdefense.org))

**"The Oregon Health Authority said it was aware of at least 11 cases of myocarditis or pericarditis in all age groups following COVID vaccination, including a 15-year old boy hospitalized after receiving a second dose of the Pfizer vaccine."**

Oregon Confirms 11 Cases of Heart Problems Following COVID Vaccines • Children's Health Defense ([childrenshealthdefense.org](https://childrenshealthdefense.org))

**"Israeli health officials said Tuesday there is a likelihood of a connection between receiving a second dose of the Pfizer COVID vaccine and the onset of myocarditis in young men aged 16-30." See**

Pfizer Vaccine 'Probably' Linked to Heart Inflammation, Israeli Panel of Experts Concludes • Children's Health Defense ([childrenshealthdefense.org](https://childrenshealthdefense.org))

Women also suffered heart complications and died after Pfizer vaccination.

In Israel, Pfizer was the biologic administered country wide

Shir-el Hilel: 22-year-old Israeli woman suffers heart inflammation, dead two weeks after second Pfizer shot - The COVID Blog

**WA teen suffers “I started to experience some upper chest pain, shortness of breath, and just really just getting winded doing everyday activities, and my neck was also swollen up, my lymph nodes were, and it felt like my airway was getting constricted in my throat”**

Rantz: Healthy teen sent to ER after Pfizer vaccine, CDC investigates heart issues (mynorthwest.com)

**See this account also for interview of only son and mother.**

<https://www.kiro7.com/news/local/kenmore-teen-develops-myocarditis-after-2nd-vaccine-shot-cdc-investigating-possible-rare-side-effect/2XVGAAJYXBATJFF3NS7JQUZCBE/>

Another 17-year old teen in WA was also sent to the ER with heart problems.

**" The mother of 17-year-old Gregory Hatton, diagnosed with pericarditis within days of his second dose of the vaccine, said her son “basically has a heart condition now and it’s terrifying.”** 18 Connecticut Teens Hospitalized for Heart Problems After COVID Vaccines, White House Says Young People Should Still Get the Shots • Children's Health Defense (childrenshealthdefense.org)

**" One day after getting the Pfizer-BioNTech COVID vaccine, Everest Romney became sick. Five days after being vaccinated, the 17-year-old was hospitalized when doctors discovered two blood clots in his brain."**

Before COVID Vaccine, Her Son Was a Healthy Athlete — Now He Can 'Barely Walk,' Mom Says • Children's Health Defense (childrenshealthdefense.org)

**12-yr old girl suffers after Pfizer injections in clinical trial.**

Maddie Paralyzed In Pfizer Vaccine Clinical Trial As Pfizer Requests EUA Authorization (circleofmamas.com)

**Pfizer minimizes adverse events in clinical trial, get EUAuthorization**

ACIP Approves Pfizer Vaccine for Adolescents 12-15 Despite Limited Safety Data (circleofmamas.com)

**Teenagers have DIED after Pfizer injections,**

Kamrynn Thomas: 16-year-old Wisconsin girl develops blood clots, dead 11 days after experimental Pfizer mRNA shot - The COVID Blog

The Pennsylvania woman said she initially felt fine after being vaccinated, but woke up in the middle of the night with no feeling in her arms or legs. “It was the scariest thing in the world to go to sleep completely fine (and walking), to wake up 1:30 in the morning and not be able to move at all,” the woman said. “I’m literally counting on my daughter to hand me my phone to call to get help.”

**33-Year-Old Woman Hospitalized for ‘Mysterious’ Paralysis 12 Hours After Pfizer Vaccine • Children's Health Defense (childrenshealthdefense.org)**

"A few weeks after receiving the vaccine, McGlaun became weak and had difficulty walking. He was admitted to CHI St. Luke's Health where he was diagnosed with GBS."

Teen Diagnosed With Guillain-Barré Weeks After First COVID Vaccine • Children's Health Defense (childrenshealthdefense.org)

***" I am 32 years old and a single mother of a 12 year old son. I recently had a terrible incident that left me fighting for my life after receiving my first dose of the Pfizer vaccine at work. I had to undergo major test and procedures and be intubated and brought back to life. I spent some time in a coma then in ICU and since I've been released and recovering home getting physical therapy and occupational therapy."***

***Adriana's Pfizer Covid Vaccine Reaction Has Left Her With 180k In Medical Bills – The Empowerer (theempoweror.com)***

The Florida Health Department and the Centers for Disease Control and Prevention are investigating the death of a Florida doctor who died Jan. 3 from a rare autoimmune disorder he developed on Dec. 21, three days after receiving **Pfizer's COVID vaccine**.

Johns Hopkins Scientist: 'A Medical Certainty' Pfizer Vaccine Caused Death of Florida Doctor • Children's Health Defense (childrenshealthdefense.org)

36-year-old doctor in Tennessee who died Feb. 8, about a month after receiving the second dose of a COVID vaccination. According to news reports, Dr. Barton Williams died from the adult form of multisystem inflammatory syndrome (MIS-A), a condition caused when the immune system attacks the body resulting in multi-system organ failure. 36-Year-Old Doctor Dies After Second Dose of COVID Vaccine • Children's Health Defense (childrenshealthdefense.org)

**J&J**

***"after Emma Burkey, 18, suffered seizures, doctors placed her in an induced coma and on a respirator. The high school senior has improved and is now awake and off the respirator, but still requires a tracheostomy tube, which has impaired her ability to speak."***

18-Year-Old Undergoes 3 Brain Surgeries From Blood Clots After J&J Vaccine • Children's Health Defense (childrenshealthdefense.org)

**College and University students should know that these medical products are NOT FDA approved or licensed, NOT mandatory for any age or occupation, may cause serious side effects.**

John Francis Foley: 21-year-old University of Cincinnati student dead 24 hours after Johnson & Johnson shot - The COVID Blog

"the woman's symptoms were consistent with the other cases, including severe headaches, shortness of breath, leg pain and stroke-like symptoms."

**Oregon woman dies after getting J&J vaccine, state health officials say | KATU**

A Mississippi man remains in critical condition, can't walk, talk and is paralyzed on one side of his body after suffering a stroke hours after being vaccinated with Johnson & Johnson's COVID vaccine. **Healthy 43-Year-Old Man Suffers Stroke From Blood Clot Hours After Receiving J&J Vaccine • Children's Health Defense (childrenshealthdefense.org)**

The family of Anne VanGeest says the 35-year-old was healthy prior to being vaccinated, and that she died of complications from the Johnson & Johnson vaccine. She was a mother.

**35-Year-Old Woman Dies of Brain Hemorrhage 11 Days After Receiving J&J Vaccine • Children's Health Defense ([childrenshealthdefense.org](https://childrenshealthdefense.org))**

**WA woman unable to work following J&J injection**

A WA State Woman's Struggle with J&J COVID-19 Vaccine Injury - Informed Choice Washington

**OR woman suffers blood clots after J&J, returns to hospital**

Woman Regrets Getting J&J Vaccine After Suffering Blood Clots, German Scientists Say They May Know What's Causing Clots • Children's Health Defense ([childrenshealthdefense.org](https://childrenshealthdefense.org))

**Scientists warn vaccinating people who already COVID could potentially cause harm, or even death.**

Scientists Challenge Health Officials on Vaccinating People Who Already Had COVID • Children's Health Defense ([childrenshealthdefense.org](https://childrenshealthdefense.org))